



## UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS  
UNITED STATES PATENT AND TRADEMARK OFFICE  
WASHINGTON, D.C. 20231  
www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 6202

<b>SERIAL NUMBER</b> 09/973,335	<b>FILING DATE</b> 10/09/2001 <b>RULE</b>	<b>CLASS</b> 607	<b>GROUP ART UNIT</b> 3737	<b>ATTORNEY DOCKET NO.</b> P00594-US
------------------------------------	---	---------------------	-------------------------------	---

**APPLICANTS**  
Barbara A. Soltz, Spring Valley, NY;  
Dale P. DeVore, Chelmsford, MA;  
Braden P. DeVore, Westerly, RI;  
Robert Soltz, Spring Valley, NY;  
Michael A. Soltz, Pleasanton, CA;

**\*\* CONTINUING DATA \*\*\*\*\***  
NONE / BCP 02-17-05

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***  
NONE / BCP 02-17-05

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED.. SMALL ENTITY \*\***  
\*\* 11/09/2001

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> NY	<b>SHEETS DRAWING</b> 10	<b>TOTAL CLAIMS</b> 5	<b>INDEPENDENT CLAIMS</b> 1
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature: <i>Bradford Clontz</i> Initials: <i>BCP</i>				

**ADDRESS**  
3017

**TITLE**  
Composite tissue adhesive

<b>FILING FEE RECEIVED</b> 370	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
-----------------------------------	---	---